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PTO/SB/21 (09-06)
Approved for use through 03/31/2007. OMB 0651-0031
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/705,294
Filing Date	November 10, 2003
First Named Inventor	William Silver
Art Unit	2624
Examiner Name	Mariam, Daniel G
Attorney Docket Number	C97-050 CON3

ENCLOSURES (Check all that apply)

- | | | |
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| <input checked="" type="checkbox"/> Fee Transmittal Form
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<input checked="" type="checkbox"/> Extension of Time Request + CHECK
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under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)
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Remarks

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Russ Weinzimmer
Signature	
Printed name	Russ Weinzimmer
Date	February 20, 2007

Reg. No.	36,717
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CERTIFICATE OF TRANSMISSION/MAILING

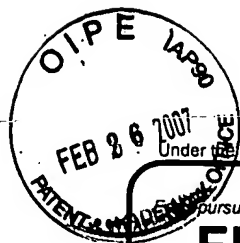
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Signature	
Typed or printed name	Russ Weinzimmer

Date	2/20/2007
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PTO/SB/17 (02-07)

Approved for use through 02/28/2007. OMB 0651-0032

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Effective on 12/08/2004.

Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL
For FY 2007**☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 130

Complete if Known

Application Number	10/705,294
Filing Date	November 10, 2003
First Named Inventor	William Silver
Examiner Name	Mariam, Daniel G
Art Unit	2624
Attorney Docket No.	C97-050 CON3

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 03-2357 Deposit Account Name: COGNEX CORPORATION

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Fee (\$)	Small Entity Fee (\$)
50	25
200	100
360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 20 or HP = _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
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3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): TERMINAL DISCLAIMER

Fees Paid (\$)

130

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 36,717	Telephone 800-621-3654
Name (Print/Type)	Russ Weinzimmer		Date February 20, 2007

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Date 2/26/2007

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